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CENTRAL FAX CENTER

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

SEP 3 0 2005

Applicant:

CTI Molecular Imaging, Inc.

Serial Number:

10/817,529 04.02.04

Filed: Examiner:

Group Art Unit:

Title:

Recipe Editor and Controller Software

Attorney Docket No.

2004P88067 US

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

CHANGE OF POWER OF ATTORNEY

Sir.

Attached please find the following forms:

- 1.) POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO form wherein all previous powers of attorney are revoked and practitioners associated with **Customer Number 028524** are appointed.
- 2.) STATEMENT UNDER 37 CFR 3.73(b) form.

Both forms have been executed by an individual who is authorized to act on behalf of the assignee.

In addition, please change the attorney docket number to: 2004P88067 US

Respectfully submitted.

Dated: 30.Sep.2005

Reg. No. 46,014

Siemens Corporation Customer No. 28524

IDNA: 7308/30.09.2005

PTO/SB/98 (09-04)
Approved for use through 07/31/2009, OMB 0651-0031
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| STATEMENT UNDER 3 | RECEIVED CENTRAL FAX CENTER |
| Applicant/Patent Owner: CTI Molecular Imaging Inc. | |
| Application No./Patent No.: 10/817,529 Filed/Issue Da | ste: 04/02/2004 SEP 3 0 2003 |
| Entitled: Recipe Editor and Controller Software | |
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| CTI Molecular imaging inc | n |
| | nee, e.g., corporation, partnership, university, government agency, etc.) |
| states that it is: 1. the assignee of the entire right, title, and interest; or | |
| an assignee of less than the entire right, title and interest. The extent (by percentage) of its ownership interest is | % |
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| Copies of assignments or other documents in the chain of title are [NOTE: A separate copy (i.e., a true copy of the original assignment Division in accordance with 37 CFR Part 3, if the assignment MPEP 302.08] | ent document(s)) must be submitted to Assignment |
| The undersigned (whose title is supplied below) is authorized to act o | on behalf of the assignee. |
| Signature / Signature | Date |
| Printed or Typed Name | Telephone Number |
| Reg. No. 46.011 | |
| Title | |

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Timo will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office. U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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SEP 3 0 2000

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POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

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| I hereby | appoint: | | | | | | | |
| Pre | actitioners asso | ciated with the Customer Number. | 138 | 4628 | | | | |
| OR | • | | | | | 」 · | | |
| Practitioner(s) named below (if more than tan patent practitioners are to be named, then a customer number must be used): | | | | | | | | |
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| as attomey(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assignment documents attached to this form in accordance with 37 CFR 3.73(b). | | | | | | | | |
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| Assignee Name and Address: | | | | | | | | |
| Assignee Name and Address: CTI Mole cular Imaging, Inc. 810 Innovation Ofive | | | | | | | | |
| \$10 Innovation Whive | | | | | | | | |
| KNOKNILLE IN 31933 | | | | | | | | |
| A copy of | f this form, to | gether with a statement und | ler 37 CFR 3.: | 73(b) (Form PTO | /SB/98 or eq | ulvalent) is req | ulred to be | |
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| the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed. | | | | | | | | |
| SIGNATURE of Assignee of Record | | | | | | | | |
| The individual whose signature and title is supplied below is authorized to act on behalf of the assignee | | | | | | | | |
| Signatue | La cep | 1765 | | | Date Z | (Soptember | 2005 | |
| Name | Daxe | L. Morehous | <u> </u> | | | 16.20/Est | | |
| Title | 5000 | etary | | | | <u></u> | <u> </u> | |

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